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ABSTRACT

Abstracts of current publications in the fields of population and family planning are presented in this pamphlet. Topical areas include: demography and social science, human reproduction and fertility control, family planning program, population policy, and general publications. Research studies, monthly reports, journal articles, and general literature are reported. (BL)

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Current Publications in Population/Family Planning

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Demography and Social Science

Arriaga, Edouardo E. "The Nature and Effects of Latin America's Non-Western Trend in Fertility." *Demography*, 7 (4): 483–501. November 1970. 13-1

A study, by historical comparison, of the fertility trends related to mortality levels in Latin America and Europe with the purpose of showing why Latin America did not repeat the European mortality-fertility pattern during 1930–1960. Differences between the two areas are established, an explanation is given about the particular Latin American mortality-fertility model, and hypothetical Latin American populations are calculated under the assumption that the area repeated the European pattern. An analysis of the fertility changes necessary to reproduce the European model in Latin America shows that it was impossible primarily because of the rapidity of the mortality decline in Latin America (a decline that took 30 years compared with more than 90 years in Europe). Thus, an extremely rapid decline in the crude birth rate in Latin America would have been necessary in order to approach the European mortality-fertility model.

Bourgeois-Pichat, Jean. "Un taux d'accroissement nul pour les pays en voie de développement en l'an 2000. Rêve ou réalité?" *Population*, 25 (5): 957–974. September–October 1970. 13-2

Using the results of the 1960 Mexican Census as a starting point, population projections are established on the basis of two different hypotheses: H_1, population growth rate reaches zero in the period 1995–2000 while expectation of life at birth increases to 74.3 years; H_2, net reproduction rate reaches 1 by the year 2000 and mortality is the same as in H_1. The impact of these hypotheses on the evolution of various demographic characteristics such as population size, school age population, labor force, aged population, and age structure is examined. Comparison of the results shows that in the case of H_1, economic and social life is likely to be deeply perturbed by the abrupt oscillations of these characteristics, while H_2 provides a smoother evolution of demographic characteristics without such disruptive effects.

Davidson, Maria. "Expectations of Additional Children by Race, Parity, and Selected Socio-Economic Characteristics, United States: 1967." *Demography*, 8 (1): 27–36. February 1971. 13-3

Following a brief review of the literature supporting the utility of fertility expectations data for prediction of aggregate fertility behavior, and the Westoff-Ryder challenge to this view, especially for annual projections, this is a study of fertility expectations of wives in relation to selected demographic, social, and economic characteristics. The data were obtained from a special survey conducted in 1967 from a probability sample of 30,000 households. The analyzed data show that the number of children expected in the next five years is inversely related to parity. Because of the inverse relationship, the expectations of additional children tend to be inversely related to age at marriage of wife, number of years married, and similar temporal variables. The data show also that there exists an inverse relationship between expectations of additional children and selected socio-economic characteristics, such as education of wife, occupation, and income of husband. These data do not provide conclusive evidence one way or the other regarding the intrinsic value of expectations data. However, in view of the fact that efficient family planning is becoming more widespread and because temporary fluctuations in current fertility may become more frequent, expectations data should continue to be collected until a definite test of their utility is established.

Dow, Thomas. "Fertility and Family Planning in Africa." *Journal of Modern African Studies*, 8 (3): 445–457. October 1970. 13-4

With the application of new analytical techniques to census and survey data, we now have a reasonable basis for estimating rates of birth, death, and population growth in sub-Saharan Africa. These findings suggest that the actual birth rate in tropical Africa must almost certainly fall in the range between 45 and 50 births per 1,000 population. Given this level of performance, it follows that African fertility in general could not have changed much over time and that it is only nominally affected by highly publicized but demographically insignificant zones of low fertility. With regard to mortality, the findings are less clear. All that can be said with any certainty is that the crude death rate has declined substantially over time and that it doubtless will continue to fall in the years ahead.

This combination of high constant fertility and declining mortality suggests a present population growth rate of perhaps 2.5 percent and a prospective growth rate of over 3 percent by 1980. In practice, such growth rates tend to decrease a nation's capacity to save and invest, and this, in turn, makes the achievement of specific social and economic goals more difficult. Kenyan data are used to illustrate this relationship in the areas of per capita income, primary education, and employment. In all three sectors, the rate of social and economic advance is found to be inversely related to the level of population growth.

Keyfitz, Nathan. "On the Momentum of Population." *Demography*, 8 (1): 71–80. February 1971. 13-5

If age-specific birth rates drop immediately to the level of bare replacement the ultimate stationary number of a population will be given by:

$$\left(\frac{b\mathring{e}_0}{r\mu}\right)\left(\frac{R_0-1}{R_0}\right) \qquad (1)$$

multiplied by the present number, where b is the birth rate, r the rate of increase, $\mathring{e}_0$ the expectation of life, and R_0 the Net Reproduction Rate, all before the drop in fertility, and μ the mean age of childbearing afterwards. This expression is derived in the first place for females on the stable assumption; extension to both sexes is provided, and comparison with real populations shows the numerical error to be small where fertility has not yet started to drop. The result (1) tells how the lower limit of the ultimate population depends on parameters of the existing population, and for values typical of underdeveloped countries works out to about 1.6. If a delay of 15 years occurs before the drop of the birth rate to replacement the population will maltiply by over 2.5 before attaining stationarity. The ultimate population actually reached will be higher insofar as death rates continue to improve. If stability cannot be assumed the ultimate stationary population Q_0 is provided by the more general expression (2):

$$Q=(\mathring{e}_0/\mu)\int_0^\beta\int_{\alpha-l}^{\beta-l} p_x\left(\frac{l_{x+t}}{l_x}\right)\left(\frac{m_{x+t}}{R_0}\right)dx\,dt \qquad (2)$$

This is still easier to calculate than a detailed projection. (Author's abstract.)

Neal, Arthur G. and H. Theodore Groat. "Alienation Correlates of Catholic Fertility." *American Journal of Sociology*, 76 (3): 460–473. November 1970. 13-6

Report of selected findings from a study based on a 1963 sample of women from the

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Toledo, Ohio, Standard Metropolitan Statistical Area (SMSA) who had a registered birth in 1962. A sample of 2,000 was drawn and data collected using a mailed questionnaire. From a return of 687 usable cases, this paper deals with 269 Catholic women. Their "alienation profile" based on measures of powerlessness, meaninglessness, and normlessness is strongly associated with fertility. Specifically, the higher the alienation score, the higher the mean number of children. However, a social isolation scale is inversely related to fertility. "Meaninglessness, normlessness, and powerlessness appear to be centrally related to the attitudinal obstacles involved in regulatory efficacy. Similarly, social isolation appears to be associated with the motivations for children as compensatory behavior."

Nizard, Alfred. "Le japon vingt ans après la loi eugénique." ***Population*****, 25 (6): 1236–1262. November–December 1970. 13-7**

The main aspects of the population policy implemented in Japan after 1948 are given and data are presented showing the evolution in the number of sterilizations and abortions, and the use of contraceptive methods between 1949 and 1965. Estimates show that the importance of abortion in reducing the number of births reached its highest point in 1955. The distribution of 100 "potential" births in 1955 was as follows: 45 "observed" births, 31 "avoided" by abortion, and 24 "avoided" by contraception; in 1965, it became: 38 "observed" births, 19 "avoided" by abortion, and 43 "avoided" by contraception.

The evolution of nuptiality and fertility is analyzed by cohorts, showing the decline in completed fertility up to the cohorts born in 1931–1940, who will probably reach a net reproduction rate equal to 0.95. An illustration is given of the anomalies in the age structure created by the fertility decline.

Rumford, John C. "Use of the Chandrasekar-Deming Technique in the Liberian Fertility Survey." ***Public Health Reports*****, 85 (11): 965–974. November 1970. 13-8**

The Liberian Fertility Study currently in progress is designed to estimate rates of fertility, mortality, and migration, using collection and estimation methods modeled after those of the Turkish Demographic Survey. This approach involves dual collection of basic data by means of monthly enumeration by a resident "registrar" and semiannual enumeration by a nonresident "supervisor," case by case matching of the birth and death reports obtained by each method, and estimation of vital events using the Chandrasekaran-Deming technique. This paper describes some of the field procedures used to adapt the basic model to local conditions. Among those discussed are: monetary incentives to the field workers of both collection systems; presentation of unofficial birth and death registration documents to respondents; recording of pregnancy or serious illness status with dependent follow-up at subsequent interviews; field verification for all discrepancies in the reported number of inhabitants in each household; and careful editing and cross-referring of documents to reduce the necessity of field verification of vital events. This paper also suggests that monthly enumeration gives better opportunities for coverage than semiannual enumeration, and resident enumerators receive more cooperation from respondents than nonresident enumerators. Other matters discussed problems relating to collection of migration data and the author's approach to tabulating vital events by subgroups according to selected characteristics.

Schultz, T. Paul and Julie De Vanzo. "Analysis of Demographic Change in East Pakistan: A Study of Retrospective Survey Data." ***Report of the Rand Corporation*****, September 1970. 72 pp. 13-9**

This report is based on a reanalysis of data collected by the University of Dacca (East Pakistan) Statistical Survey Research Unit. Data were collected in a series of multiround retrospective surveys beginning in April 1961 (first round) and terminating in November 1962 (second round composed of four quarterly surveys). The study is limited to households with at least one "at least once married" woman.

The data indicate a significant decline in infant mortality and total marital fertility over the period 1952–1961. Although no alternate evidence is available to document such a decline, the writers accept the evidence derived from the secondary analysis of the retrospective surveys.

An *ad hoc* multiple regression model based on available data is presented to explore the determinants of fertility. This analysis is reported to indicate that the expected probability of birth for a married woman is a function of her age, recent births, and own child deaths.

Williamson, John B. "Subjective Efficacy and Ideal Family Size as Predictors of Favorability Toward Birth Control." ***Demography*****, 7 (3): 329–339. August 1970. 13-10**

". . . An assessment of the relevance of subjective efficacy and ideal family size as predictors of favorability toward birth control. The samples considered are male factory workers in five developing nations. The effects of ideal family size and subjective efficacy are generally strong relative to those of education and the other social variables that are considered," although the percentages of variance explained by the model are not large, (ranging up to a maximum of 17 percent for India). "The focus of the study is an analysis of whether subjective efficacy and ideal family size function more as independent determinants or more as intervening variables. Overall, these psychological variables function more as independent determinants than as intervening variables, but in some samples these two functions are equally important."

Human Reproduction and Fertility Control

Bernstein, G. S. "Clinical Effectiveness of an Aerosol Contraceptive Foam." ***Contraception*****, 3: 37–43. January 1971. 13-11**

A vaginal contraceptive foam was used by 2,932 women at six clinical centers for 28,322 cycles. A pregnancy rate of 3.98/100 women-years was observed, which was found to be independent of the age, parity, or education of the women. The low pregnancy rate is attributed to careful instruction and frequent contact with the patient to maintain motivation. The average patient used the foam for 270 days, and 1,076 women remained in the study at the end of a year. Thus, certain women who cannot or do not wish to use oral contraceptives or intrauterine devices, may under proper supervision employ vaginal foam with a respectable degree of contraceptive effectiveness.

Carr, D. H. "Chromosome Studies in Selected Spontaneous Abortions: One Period Conception After Oral Contraceptives." ***Canadian Medical Association Journal*****, 103: 343–348. 15 August 1970. 13-12**

Chromosomal abnormalities were found in 48 percent of the 54 aborted fetuses of women who conceived within six months after discontinuation of oral contraception (POC), compared with 22 percent in the control group of 227 abortuses. The most striking difference was observed in the incidence of polyploidy, which occurred in nearly 30 percent of the POC series (16 out of 54) and in about 5 percent of the control group (11 out of 227). Triploidy, which is usually lethal early in embryonic life, was 4.5 times more common in the POC group than among the controls. The incidence of trisomy 45/X anomaly was not increased in the POC group. The author recommends the introduction of abortion registries accompanied by detailed pregnancy histories for the study of the *mechanisms* of congenital defects.

"Family Planning." ***The Practitioner*****, 205: 5–66. July 1970. 13-13**

Report of a symposium on contraception and infertility, primarily intended for physicians. Contains nine papers reviewing the advantages and disadvantages of oral, intrauterine, and mechanical methods of contraception, the rhythm method, sterilizing operations on males and females, the so-called fertility drugs (clomiphene, gonadotrophins), and the medical component of child adoption.

Feldman, J. G. and J. Lippes. "A Four-Year Comparison Between the Utilization and Use-effectiveness of Sequential and Combined Oral Contraceptives." ***Contraception*****, 3: 93–104. February 1971. 13-14**

In this study conducted at a family planning center, 722 women received sequential oral contraceptives and 1,278 received combination pills. Over a four-year period the cumulative pregnancy rate per 100 women-years for the group on the combination pill was 2.1, while the figure for the group on sequentials was 7.3. The four-year continuation rate for combination pill users was 49.6 percent as compared to 35.8 percent for sequential pill users. Fewer women terminated from the combination pill because of side effects and, of these women, a larger portion returned to oral contraception than did the women who stopped taking the sequential pill for this reason. This study suggests that combination pills provide better protection against pregnancy with fewer side effects than do sequential pills.

Fuertes-de la Haba, A., G. Vega-de Rodriquez, and I. Pelegrina. "Carbohydrate Metabolism in Long-Term Oral Contraceptive Users." ***Obstetrics and Gynecology*****, 37: 220–224. February 1971. 13-15**

Carbohydrate metabolism was evaluated in the women remaining on oral contracep-

tives from the 836 subjects of the original Garcia, Pincus, and Rock study group. Of these 53 women, of whom some had taken oral contraceptives as long as thirteen years, two were diabetics. One had the condition before beginning oral contraception, while the other had a family history of diabetes. Five women exhibited abnormal glucose tolerance tests, but have not developed signs of diabetes or its complications. Although the data of this study show an early and persistent alteration of oral glucose tolerance in women taking oral contraceptives, there is no indication that these women show a definite trend toward development or aggravation of diabetes.

Gertner, M., L. Y. F. Hsu, J. Martin, and K. Hirshhorn. "The Use of Amniocentesis of Prenatal Genetic Counseling." *Bulletin of the New York Academy of Medicine*, (46): 916–921. November 1970. 13-16

Transabdominal amniocentesis for prenatal detection of genetic disorders was performed in the fourteenth to thirtieth week of pregnancy on 50 women, of whom 20 were scheduled for therapeutic abortions for psychiatric reasons and 30 were at an increased risk of producing abnormal offspring. In all of the 25 pregnancies which came to term following the procedure, the prenatal diagnosis was confirmed. No fetal or maternal complications resulted from the procedure. The procedure permits the detection of biochemical disorders and genetic abnormalities, as well as the determination of the sex of the fetus. The possibility of intrauterine treatment of affected fetuses and of therapeutic abortions based on these diagnoses is mentioned.

Hermalin, Albert I. and L. P. Chow. "Motivational Factors in IUD Termination: Data from the Second Taiwan IUD Follow-up Survey." *Taiwan Population Studies Working Paper No. 5*, Population Studies Center, University of Michigan, October 1970. 45 pp. 13-17

"The Second Taiwan Follow-up Survey, reported on here, is a representative sample of all IUD acceptors through mid-year 1966. The data show that 30 months after insertion, 36 percent of acceptors are continuing users, on a first segment basis, and that if reinsertions are taken into account, the proportion increases to 45 percent. Termination rates by social and demographic characteristics show that these rates decline with increasing age and parity, as expected. Sizable differentials in these rates were also found when acceptors were classified as to their purpose in using an IUD and as to their desire for more children. These effects were partially independent of age and parity. These 'motivational' variables were used in cross-tabulations to show how they might clarify the effect of age and parity, as well as to derive a number of other implications for the evaluation and operation of a family planning program. Lastly, the rate of reinsertion was seen to depend on the type of termination and, taking into account the type of termination, to be generally inverse to the pattern of termination by social and demographic characteristics." (Authors' abstract.)

The survey covered a sample of 4,648 women, 2,000 of whom represented reinterviews from the first follow-up study conducted in 1965.

Lehfeldt, H., C. Tietze, and F. Gorstein. "Ovarian Pregnancy and the Intrauterine Device." *American Journal of Obstetrics and Gynecology*, 108: 1005–1009. 1 December 1970. 13-18

"Nine ovarian pregnancies among women with an intrauterine device (IUD) in situ are reviewed in this report. Five cases were discovered among 45 ectopic pregnancies reported in the Cooperative Statistical Program (CSP) of the Population Council, and four additional cases were obtained in response to a notice published in the *American Journal of Obstetrics and Gynecology* or by personal contacts. The ratio of one ovarian pregnancy to nine ectopic pregnancies among IUD wearers in the CSP is much higher than in the general population, where it is about 1:200. Estimation of the probable number of fertilized ova among women wearing IUDs suggests that the device reduces uterine implantation by about 99.5 percent, tubal implantation by 95 percent, and the incidence of ovarian pregnancy not at all. This finding could be explained by the production in the endometrium of an agent interfering with either fertilization or implantation and suggests direct chemical action, possibly by retrograde flow into the tubes." (Authors' abstract).

Schenker, J. G., E. Jungreis, and W. Z. Polishuk. "Oral Contraceptives and Serum Copper Concentration." *Obstetrics and Gynecology*, 37: 233–237. February 1971. 13-19

Serum copper levels were measured in 502 women taking oral contraceptives. After one or two cycles, values rose from about 130μg/100ml to approximately 200μg/100ml in more than 90 percent of the subjects. In the remaining 31 subjects, values rose above 275μg/100ml. This group included the only six women from the entire study to experience clinical side effects, and whose laboratory tests suggested possible liver dysfunction. Serum copper levels usually returned to normal in about a month after the pills were discontinued.

Seymour, R. F. and L. C. Powell. "Depo-Medroxyprogesterone Acetate as a Contraceptive." *Obstetrics and Gynecology*, 36: 589–596. October 1970. 13-20

A long-acting progestational agent, Depomedroxyprogesterone acetate (DMPA), was administered at 3-month intervals to 752 women from a low-income population attending a family planning clinic, for a total of 10,000 months of use. A completely unpredictable bleeding pattern was the only major side effect. Two women were hospitalized for evaluation of anemia but did not require transfusion. The regularity of the bleeding cycle was improved by the monthly administration of supplemental oral estrogen. Of the 752 women, 302 were active at the end of the study, 262 had discontinued, and 188 were lost to follow-up. One pregnancy occurred which was classified as a method failure. The authors conclude that "DMPA appears to be a highly effective contraceptive agent, well-suited to a clinic-type population requiring infrequent motivation."

Solal, R. and Y. Bottoz-Meynard. "Intrauterine Devices Broken in Situ." *Contraception*, 2: 407–413. December 1970. 13-21

Reports on eight cases in which the Lippes loop fragmented while in situ, because of defective materials. The fragmentation in some instances was followed by expulsion, bleeding, and pain. The evidence suggests that fragmented IUDs should be removed and not left in situ.

United Kingdom Registrar General. *Statistical Review of England and Wales for the Year 1968: Supplement on Abortion.* Her Majesty's Stationery Office, London, 1970. 31 pp. 13-22

Contains data on legally induced abortions in England and Wales for the first eight months since the new Abortion Act went into effect on 27 April 1968, by demographic and socioeconomic characteristics of the woman, type of operation, gestational age, indications, duration of stay, and place of abortion in National Health Service (N.H.S.) hospitals or other approved facilities.

Family Planning Programs

Chen, H. C. and A. I. Hermalin. "Factors Affecting the Performance of Field Workers in the Taiwan IUD Program." *Taiwan Population Studies Working Paper No. 7*, Population Studies Center, University of Michigan, September 1970. 27 pp. 13-23

A study, conducted by the Taiwan Population Studies Center, of the causal relationship between the recruitment of IUD cases and the demographic characteristics of the family planning field worker, the geographic area to which she is assigned, and her methods of work. It was found that married workers performed better than single ones and that more work in the form of visits and local meetings resulted in more client acceptance. The findings suggested that field workers performed better the longer they remained in one area, but duration of experience may also have been a factor. Among the aspects needing further study are the relationship between performance and the size of the area and the reasons for the direct relationship between the number of cases recruited and the number of coupons issued. The major part of the data was obtained from the monthly reports of the field workers, the *Demographic Reference* volume of the Taiwan Population Studies Center, and the *Demographic Fact Book* of the Civil Affairs Department of the Taiwan Provincial Government

Gardezi, H. N. and A. Inayatullah. *The Dai Study: The Dai-Midwife—A Local Functionary and Her Role in Family Planning.* West Pakistan Family Planning Association, 1969. 106 pp. 13-24

Presents the findings of a study designed to appraise the role of a sample of 70 midwives or Dais working as family planning workers in Lahore, Pakistan. Concludes with the following statement: "It is felt that it was a miscalculation to only enroll dais and then with this near total reliance on this class too many were involved too soon, many were added to meet the total administrative requirements, many joined for the money, few comprehended the motivational aspect of the assignment and fewer still were genuinely involved with the movement."

Korea National Family Planning Center. "Korean Family Planning Monthly Report." Mimeo. August 1970. 11 pp. 13-25

The first of a new series of monthly reports intended for "observation and evaluation of the Korean Family Planning Programs." Summarizes current status of family planning activities, the work of the National Family Planning Center, training activities, the Planned Parenthood Federation of Korea, research and evaluation, and information and education. Contains tables showing number of loops inserted, vasectomies performed, and oral pills and condoms distributed.

Seidman, D. R. *Family Planning Service Programs: An Operational Analysis.* U. S. Department of Health, Education, and Welfare, May 1970. 109 pp. 13-26

Discusses administration of family planning clinics at the decision-making level. Alternative methods of promoting patient registration are evaluated in terms of cost per registrant and the proportion of the target population reached; follow-up procedures, by cost per appointment and continuation rates; and contraceptive devices, by the pregnancy rate per 100 woman-years and the cost per recipient.

Speidel, J. J. and L. Wiener. "Continuance of Family Planning in a Health Department Clinic." *American Journal of Obstetrics and Gynecology*, 108: 1134–1140. 1 December 1970. 13-27

To reduce the high rate of discontinuation of contraception among clinic populations, and hence the pregnancy rate, the authors recommend: "(1) Provision of easily available information on locations of family planning services to assist those moving away from a clinic. (2) Provision of adequate education and counseling services which include the husband when appropriate. Advice concerning side effects of contraceptives and other problems relating to the clinic program should ideally be available on a 24-hour basis. (3) Making the clinic as convenient as possible with respect to transportation, hours of operation, and administrative procedures such as appointments. (4) Elimination of any charges for services and supplies if possible. (5) Encouraging friendliness and enthusiasm on the part of program personnel. (6) Maintenance of a follow-up program for dropouts to solve individual patient problems and identify problem areas relating to clinic procedures."

The study was conducted among 799 women attending the Bedford Maternity Care Clinic in a low income area in Brooklyn for the period January 1965–June 1966. Using life table procedures, it was estimated that 23 percent of the women stopped coming to the clinic within three months and 42 percent within six months.

Taiwan Provincial Institute of Family Planning, *Quarterly Report on Taiwan's Family Planning and Population Studies*, Taichung. 13-28

A quarterly series first issued in January 1969, presenting current activities involving the administration, the family planning action program, evaluative research, and related functions of the Taiwan Provincial Institute of Family Planning.

Population Policy

Beck, M. B. "Abortion: The Mental Health Consequences of Unwantedness." *Seminars in Psychiatry*, 2: 263–271. August 1970. 13-29

"The consequences of abortion for the physical and mental wellbeing of the mother, the child, key family members, and the community require investigation if judicious action is to accompany changing abortion statutes and practices. The literature to date, especially in the U. S., abounds in conjecture. From the standpoint of an infant, there appears to be no positive relationship between a woman's biologic capacity to conceive and her ability to meet his physical and psychological needs. Hence, it is important to learn much more than we now understand about the life events that confront infants who are the products of enforced pregnancies. Important, too, is the significance to the mother and her family if she is compelled to bear an unwanted child." (Author's abstract.)

United States Agency for International Development, Office of Population. *Population Program Assistance: Aid to Developing Countries by the United States, Other Nations, and International and Private Agencies.* October 1970. 192 pp. 13-30

The fourth annual report of the Agency for International Development (AID) on "Population Program Assistance." AID family planning activities and assistance programs are reviewed. Specific projects on population planning with fiscal year obligations are listed for the years 1955–1970.

General

Commission on Population Growth and the American Future. *Population Growth and America's Future.* U. S. Government Printing Office, 16 March 1971. 49 pp. 13-31

The interim report to the President of the United States and the American Congress and people by the National Commission on Population Growth and the American Future discusses the population situation in the United States, outlines questions about the probable implications of future growth, and identifies issues involved in an explicit policy on population. ". . . We have to question old assumptions and make new choices based on what population growth means for the Nation today . . ." the Commission says. ". . . Do we wish to continue to invest even more of our resources and those of much of the rest of the world in meeting demands for more services, more classrooms, more hospitals, and more housing as population continues to grow? Or should we concentrate our energies and resources on improving the quality of existing services and extending them to large numbers of our people for whom the 'quality of life' still means just getting a square meal?"

The National Commission on Population Growth and the American Future was appointed "to examine the probable course of population growth and internal migration in the United States between now and the year 2000; to assess the problems this will pose for our government, our economy, and our resources and environment; and to make recommendations on how the Nation can best resolve these problems." Its interim report is divided into four chapters. The first one, "Population in Perspective," introduces the problem and the purpose of the Commission. The second chapter, "The Prospects for Population Change," outlines the Commission's research on prospects for population growth, including "projections of population and population characteristics and studies of the importance of unwanted childbearing, the demographic impact of immigration, abortion, voluntary sterilization and family planning programs, the future of contraceptive technology, and the level of popular education about population." The third chapter, "Population and the Quality of Life," lists the various questions before the Commission, given a likely population of 300,000,000 sooner or later: "Is it in the national interest to reach that level later rather than sooner? What demands are implied by the growth that is to be expected? And, what difference will it make whether we grow to 400,000,000 after that?" It poses a range of questions about the effect of population growth on environment and resources, the economy, the government, and the social order, and the systems necessary for their achievement. The fourth chapter, "Policy Issues," outlines the aim of the Commission in its second year: "to determine what population prospects inevitably must be accommodated in the short run, and what kind of national population policy is desirable now for the long run."

The Commission is devoting its second year to a detailed examination of the probable course of population growth and distribution and their environmental, economic, political and social implications. The three appendices include sources for the data in the text and charts, a list of the research projects (and their directors), and papers of the Commission, and the Commission's mandate. The Commission will present its findings and recommendations in its final report in March 1972.

THE POPULATION COUNCIL

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